

SAN FRANCISCO HEALTH PLAN

CO-06 Abortion Services

APPROVAL/REVIEW/REVISION HISTORY

Signature	Title	Date	Action
<div>DocuSigned by:</div> <div><i>Nina Maruyama</i></div> <div>9D4617B1400D431...</div>	CCO	5/29/2024	Policy Update
<div>DocuSigned by:</div> <div><i>Steve O'Brien</i></div> <div>60DFB20814944C4...</div>	CMO	6/4/2024	



SFHP POLICY AND PROCEDURE

Abortion Services

Policy and Procedure number:	CO-06
Department	Clinical Operations
Accountable Lead:	Clinical Operations Analyst
Lines of Business Affected:	<input checked="" type="checkbox"/> Medi-Cal <input checked="" type="checkbox"/> Healthy Workers HMO <input type="checkbox"/> Healthy SF <input type="checkbox"/> City Option <input type="checkbox"/> All lines of business and coverage programs as listed above

POLICY STATEMENT

San Francisco Health Plan (SFHP) complies with the Reproductive Privacy Act (CA Health and Safety Code 123460 et seq) to ensure every member possess their fundamental right to privacy with respect to reproductive decisions, including the right to obtain an abortion.

Abortion services as well as the medical services and supplies incidental or preliminary to an abortion are SFHP benefits that all members, regardless of age, shall be able to obtain promptly without medical justification consistent with the requirements outlined in the Medi-Cal Provider Manual. There are no annual or lifetime limits on the coverage of outpatient abortion services. Minors may choose to have an abortion under the Medi-Cal Minor Consent program without parental consent as described in California law (Family Code §6925) and American Academy of Pediatrics v. Lungren. SFHP, its providers, and contractors must obtain member consent prior to sharing medical information about abortion services.

SFHP does not require prior authorization for outpatient abortion services; however, inpatient abortion services do require prior authorization. This policy covers all abortions regardless of the gestational age of the fetus, including, when appropriate, use of Mifepristone (Mifeprex, RU-486) for medical abortions.

If a provider has a moral objection to abortion services, members can contact SFHP's Customer Service for alternative provider options.

In addition to the abortion services, all SFHP members are advised of their options for all contraceptive methods to allow them to provide informed consent for their choice of contraceptive methods. The types of birth control methods include long-acting reversible

contraceptives, hormonal methods, barrier methods, natural family planning, and sterilization.

PROCEDURE

I. Medi-Cal:

- a. **Outpatient.** SFHP Medi-Cal members may self-refer to any provider for an outpatient abortion without prior authorization. It is not required for the provider to be contracted with SFHP.
- b. **Inpatient.** Abortions while in an inpatient facility require prior authorization and must be performed within the member's medical group / network. If the service is not available within the member's medical group / network, SFHP will approve an authorization request to another facility within the SFHP network, and if necessary, to an out-of-plan facility.

II. Healthy Workers HMO:

- a. **Outpatient.** SFHP HW HMO members must stay within their medical group for outpatient abortions. Prior authorization is not required. If services are not available in their medical group, SFHP will approve out-of-medical group, and if necessary, out-of-network. No medical necessity review is required.
- b. **Inpatient.** Abortions while in an inpatient facility require prior authorization and must be performed within the member's medical group. If the service is not available within the medical group, SFHP will approve an authorization request within the SFHP network.

III. Mifepristone:

Access to Mifepristone for medical abortions shall be provided in accordance with the FDA approved treatment regimen and other mandated requirements. Under Federal law, mifepristone must be provided by, or under the supervision of, a physician who meets the following qualifications:

- A. Has the ability to assess the duration of pregnancy accurately.
- B. Has the ability to diagnose ectopic pregnancies.
- C. Has the ability to provide or arrange immediate intervention in cases of medical complications, incomplete abortion, ectopic pregnancy, and infection or severe bleeding.
- D. Understands the prescribing information on mifepristone. The prescribing information is available by calling the toll free number, 1-877-432-7596, or accessing the manufacturer's website at www.earlyoptionpill.com

In addition, the prescribing provider must emphasize to the member that timely follow-up after use of mifepristone is necessary to confirm that a complete termination of pregnancy has occurred and that there have been no complications. The prescribing provider must notify the manufacturer, in writing, in the event of an on-going pregnancy which is not terminated subsequent to the conclusion of the treatment procedure. While serious adverse events associated with the use of mifepristone are rare, the prescribing provider must report any hospitalization, transfusion, or other serious event to the

manufacturer, identifying the member solely by package serial number to ensure member confidentiality.

MONITORING

SFHP's monitoring:

- A. SFHP utilizes a variety of methods to monitor and track service utilization to identify patterns of over- /underutilization. The Utilization Management Committee (UMC) is responsible for the monitoring of utilization data to identify potential services being over- or underutilized. If a service is identified, the UMC will conduct further discussions and analysis to identify opportunities for improvement.
- B. SFHP's Clinical Operations Department performs inter-rater reliability audits at least annually for both physician and nurse reviewers.
- C. SFHP's Member Services and Health Services Programs Departments evaluate member grievances and appeals, as well as SFHP's member and provider satisfaction survey responses, to identify patterns.
- D. The SFHP Chief Medical Officer (CMO), Medical Director, or physician designee identifies any potential quality issues (PQI), including provider preventable conditions (PPCs), and follows the PQI process as defined in QI-18: PQI and the PPC process defined in QI-19: PPCs.
- E. The Utilization Management Committee (UMC) reviews Appeals, IMRs, and State Fair Hearings resulting in authorization decision made by SFHP or one of its delegated medical groups. The UMC recommends corrective action and/or identifies where the Clinical Operations Department can revise the authorization process, if necessary, to improve the member experience, to address any barriers, and ensure the utilization management criteria are consistent with current industry and evidence-based practices. The Quality Improvement and Health Equity Committee (QIHEC) reviews an Appeals Report (overturned and upheld appeals) every quarter regarding the activity of pharmacy and medical authorizations.
- F. Dashboards and other reports regarding SFHP's Clinical Operations Department's monitoring activities are reviewed by the Utilization Management Committee (UMC) and presented to QIHEC at least annually for evaluation and corrective actions as needed.
- G. Medical groups delegated to perform utilization management are audited annually as outlined in DO-02: Oversight of Delegated Functions.

DEFINITIONS

Abortion: Any medical treatment intended to induce the termination of a pregnancy except for the purpose of producing live birth. Abortion by definition is a sensitive service.

Minor Consent Services: Covered Services of a sensitive nature which minors do not need parental consent to access, related to:

- A. Sexual assault, including rape.
- B. Drug or alcohol abuse for children 12 years of age or older.
- C. Pregnancy.
- D. Family planning.
- E. Sexually transmitted diseases (STDs), designated by the Director, in children 12 years of age or older.

AFFECTED DEPARTMENTS/PARTIES

Operations -- Claims
Health Services -- Clinical Operations
Compliance and Regulatory Affairs
Operations -- Member Services
Delegated Groups
Health Services -- Health Services Programs
Network Providers
Provider Network Operations

RELATED POLICIES AND PROCEDURES AND OTHER RELATED DOCUMENTS

CRA-25: Minor Consent
DO-2: Oversight of Delegates
Evidence of Coverage (Healthy Workers)
Member Handbook (Medi-Cal LOB)
Provider Manual
GA-01: Clinical Member Grievances
QI-18: Potential Quality Issues

REVISION HISTORY

Original Date of Issue: February 6, 2004
Revision Date(s): April 18, 2007, September 24, 2010, December 11, 2014, February 16, 2017, July 31, 2019, July 22, 2021, September 22, 2022, March 30, 2023, February 24, 2024, May 23, 2024

REFERENCES

1. American Academy of Pediatrics v. Lungren
2. Title 22 CCR, Section 51327
3. The Medi-Cal Provider Manual for Abortions
4. DHCS APL 24-003 (Supersedes APL 22-022): Abortion Services
5. DHCS APL 01-003: Mifepristone as Medi-Cal Benefit
6. Family Code §6925
7. H&S Code §§123460 et seq.